PART B - FEE(S) TRANSMITTAL									
Complete and send	this form, together wit	th plicable	fèe(s), to: [<u>Mail</u>	Mail Stop ISSUF Commissioner for P.O. Box 1450 Alexandria, Virg	r ratents	.1450	K	
			or	Fax	(703) 746-4000		52	0.39251X00	
			UE FEE and rders and not a) specifying	PUBLIC dification a new c	CATION FEE (if requ of maintenance fees v orrespondence address;	ired). Blocks vill be mailed and/or (b) ind	through 5 s to the current dicating a sepa	hould be completed where correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDEN	CE ADDRESS (Note: Use Block 1 for	any change of address)			Note: A certificate of	mailing can o	nly be used for	or domestic mailings of the	
020457 7 ANTONELLI, T	DAIIC LID			papers. Each additional have its own certificate	al paper, such a of mailing or	annot be used as an assignment transmission.	for any other accompanying ent or formal drawing, must		
1300 NORTH SEY SUITE 1800 ARLINGTON, VA			I hereby certify that the States Postal Service vaddressed to the Mai transmitted to the USP	tificate of Ma his Fee(s) Trans with sufficient I Stop ISSUE TO (703) 746-	iling or Trans smittal is bein postage for fir FEE address 4000, on the c	smission g deposited with the United st class mail in an envelope above, or being facsimile date indicated below.			
04/29/2005 MBEYENE2 0						(Depositor's name)			
01 FC:1501	1400000 OP	2 8 2005						(Signature)	
VI (CIIOVI	140000 01	Ø.						(Date)	
APPLICATION NO.	FILING DATE	DEMARKS	FIRST NAME	D INVEN	TOR	ATTORNEY D	OCKETNO	CONFIRMATION NO.	
09/698,274	10/30/2000	Shinya Yamaguci			ni	520.392		6630	
TITLE OF INVENTION: S	MAKING THE SAME AND LIQUID CRYSTAL DISPLAY DEVICE								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PU	BLICATION FEE	TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	NO	\$1400			\$0	\$1400		04/28/2005	
EXAMINER		ART UN	ART UNIT CI		ASS-SUBCLASS				
ABRAHAM, FETSUM		2826	2826		257-066000				
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the pate CFR 1.363).						t	Antone1	li, Terry, Stout	
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys 1 & Kraus, LLP or agents OR, alternatively,						
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)									
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified bel 37 CFR 3.11. Completion of	low, no assignee of this form is NO	data will app Γa substitute	ear on the	ne patent. If an assigne g an assignment.	ee is identified	below, the do	ocument has been filed for	
(A) NAME OF ASSIGN		RESIDENCE: (CITY and STATE OR COUNTRY)							
Hitachi, Ltd.				Tokyo, Japan					
	assignee category or categor	ies (will not be pr	inted on the p	atent) :	☐ Individual ☑ Co	rporation or ot	her private gro	oup entity Government	
4a. The following fee(s) are	enclosed:	4b	. Payment of						
Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.									
Advance Order - # of	mall entity discount permitted	Payment by credit card. Form PTO-2038 is attached.							
Advance Order - # or	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 01-2135 (enclose an extra copy of this form).								
	(from status indicated above)		_	_					
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).									
NOTE: The Issue Fee and Puinterest as shown by the reco	s requested to apply the Issue ublication Fee (if required) wi rds of the United States Pater	e Fee and Publicat ill not be accepted at and Trademark	ion Fee (if an I from anyone Office.	y) or to r other th	e-apply any previously an the applicant; a regis	paid issue fee tered attorney	to the applicat or agent; or th	tion identified above. e assignee or other party in	
Authorized Signature	Honda	9				pril 28,			
Typed or printed name	Gregor E. Mo	ontone			Registration)	28,1	41		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Typed or printed name

Registration No.